



**DEPARTMENT OF ENVIRONMENTAL QUALITY
REGISTRATIONS & CERTIFICATIONS SECTION
P.O. BOX 4313
BATON ROUGE, LOUISIANA 70821-4313
TELEPHONE: (225) 219-3041 FAX: (225) 219-3154**

OFFICE USE ONLY
License #
AI #
Amendment #
Docket #

RADIOACTIVE MATERIAL LICENSE TERMINATION OR LOCATION CLOSURE

Licensee Name and Address	License #	Agency Interest #														
<p>A. LICENSE STATUS <i>(Check the appropriate box)</i></p> <p><input type="checkbox"/> 1. Terminate this license. <input type="checkbox"/> No radioactive materials have ever been procured or possessed by the licensee under this license. <input type="checkbox"/> All activities authorized by this license have ceased, and all radioactive materials procured or possessed by the licensee under this license have been disposed of as described in Section B of this form.</p> <p><input type="checkbox"/> 2. Remove locations off of this license, and keep the license active. Specify locations: _____ _____ <input type="checkbox"/> No radioactive materials have ever been procured or possessed by the licensee at these locations. <input type="checkbox"/> All activities authorized by this license for these locations have ceased, and all radioactive materials procured or possessed by the licensee at such locations have been disposed of as described in Section B of this form.</p> <p>B. TRANSFER OF RADIOACTIVE MATERIAL <i>(Check the appropriate boxes and complete as necessary. Provide attachments if needed.)</i></p> <p><input type="checkbox"/> Transfer of radioactive materials was to the licensee listed below:</p> <p><input type="checkbox"/> Disposal of radioactive materials: <input type="checkbox"/> Directly by the licensee: <input type="checkbox"/> By licensed disposal site: <input type="checkbox"/> By waste contractor:</p> <p>C. SURVEYS AND LEAK TESTS</p> <p><input type="checkbox"/> The licensee conducted a radiation survey. The survey confirms the absence of licensed radioactive material.</p> <p><input type="checkbox"/> A copy of the radiation survey results: <input type="checkbox"/> is attached <input type="checkbox"/> is not attached (provide explanation) <input type="checkbox"/> was forwarded to LDEQ on ____.</p> <p><input type="checkbox"/> The results of the latest leak test(s) are attached.</p> <p>D. CONTACT INFORMATION</p> <table border="1"><thead><tr><th>Name</th><th>Title</th><th>Telephone No.</th><th>E-Mail Address</th></tr></thead><tbody><tr><td colspan="4">Mail All Future Correspondence Regarding This License to:</td></tr></tbody></table> <p>E. CERTIFYING OFFICIAL</p> <table border="1"><thead><tr><th>Printed Name and Title</th><th>Signature</th><th>Date</th></tr></thead><tbody><tr><td colspan="3"></td></tr></tbody></table>			Name	Title	Telephone No.	E-Mail Address	Mail All Future Correspondence Regarding This License to:				Printed Name and Title	Signature	Date			
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